24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN VOTE!	
	C C00473918
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Moxie Media	M M / D D / Y Y Y Y
Mailing Address PO Box 30084	07 25 2014 Amount
	ioris o
City State Zip Code Seattle WA 98113	13755.02 Transaction ID : SE-6208
	Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 14
Brenda Lawrence Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Moxie Media	M = M / D = D / Y = Y = Y
Mailing Address PO Box 30084	07 25 2014
3 T O BOX 300004	Amount
City State Zip Code	1528.34
Seattle WA 98113	Transaction ID : SE-6209
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Mailhouse Type	
Name of Federal Candidate Support Office	e Sought: X House District: 14
Hansen Clarke Oppose	President Senate State: MI
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 133804.08 Disbute 2014	
(a) SUBTOTAL of Itemized Independent Expenditures	15283.36
(a) SOBTOTAL OF ICHTIZED INDEPENDENT EXPONDITURES	10200.30
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Bato	07 25 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN VOTE!	C C00473918
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee	Date of Public Distribution/Dissemination
Moxie Media	07
Mailing Address PO Box 30084	Amount
City State Zip Code	54889.91
	Transaction ID : SE-6210 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Collean Wakako Hanahusa	President Senate State: HI
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	sement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	rsement For: Primary General Other (specify) ▶
, , ,	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	54889.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	70173.27
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Caroline Fines [Electronically Filed] Date 07	
Signature	